

Identity Theft Affidavit

Section E – Representative Information (Required only if completing this form on someone else's behalf)

If you are completing this form on behalf of another person, you must complete this section and attach clear and legible photocopies of the documentation indicated.

Check only **ONE** of the following four boxes next to the reason why you are submitting this form

- ☐ The taxpayer is deceased and I am the surviving spouse. (No attachments are required)
- ☐ The taxpayer is deceased and I am the court-appointed or certified personal representative.
Attach a copy of the court certificate showing your appointment.
- ☐ The taxpayer is deceased and a court-appointed or certified personal representative has not been appointed.
Attach a copy of the death certificate or the formal notification from the appropriate government office informing the next of kin of the decedent's death. Indicate your relationship to the decedent: _____
- ☐ The taxpayer is unable to complete this form and I have been appointed conservator or have Power of Attorney (POA) authorization.
Attach a copy of the documentation showing your appointment as conservator or your POA authorization.
If you are the POA and have been issued a CAF number by the IRS, enter it here: _____

Representative's name _____

Current mailing address _____

City _____

State _____

ZIP code _____

Section F – Penalty Of Perjury Statement and Signature (Required for all filers)

Under penalty of perjury, I declare that, to the best of my knowledge and belief, the information entered on this form is true, correct, complete, and made in good faith.

Signature of taxpayer or representative of taxpayer _____

Date signed _____

Instructions for Submitting this Form

Submit this form and clear and legible copies of required documentation using **ONE** of the following submission options.
Mailing **AND** faxing this form **WILL** result in a processing delay.

By Mail**By FAX**

If you checked Box 1 in Section A and are unable to file your return electronically because the primary and/or secondary SSN was misused, attach this form and documentation to your paper return and submit to the IRS location where you normally file. If you have already filed your paper return, submit this form and documentation to the IRS location where you normally file. Refer to the "Where Do You File" section of your return instructions or visit IRS.gov and input the search term "Where to File".

If you checked Box 1 in Section A and are submitting this form in response to a notice or letter received from the IRS, return this form and documentation with a copy of the notice or letter to the address contained in the notice or letter.

If you checked Box 2 in Section A (you do not currently have a tax-related issue), mail this form and documentation to:

Internal Revenue Service
PO Box 9039
Andover MA 01810-0939

If you checked Box 1 in Section A and are submitting this form in response to a notice or letter received from the IRS that shows a reply FAX number, FAX this completed form and documentation with a copy of the notice or letter to that number. Include a cover sheet marked "Confidential." If no FAX number is shown, follow the mailing instructions on the notice or letter.

If you checked Box 2 in Section A (you do not currently have a tax-related issue), FAX this form and documentation to: (855) 807-5720.

NOTE: The IRS does not *initiate* contact with taxpayers by email, fax, or any social media tools to request personal or financial information. Report unsolicited email claiming to be from the IRS and bogus IRS websites to phishing@irs.gov.

NOTE: For more information about questionable communications purportedly from the IRS, visit IRS.gov and input the search term "Fake IRS Communications".

Other helpful identity theft information may be found on www.irs.gov/uac/Identity-Protection. Additionally, locations and hours of operation for Taxpayer Assistance Centers can be found at www.irs.gov (search "Local Contacts").

Note: The Federal Trade Commission (FTC) is the central federal government agency responsible for identity theft awareness. The IRS does not share taxpayer information with the FTC. Refer to the FTC's website at www.identitytheft.gov for additional information, protection strategies, and resources.

Privacy Act and Paperwork Reduction Notice

Our legal authority to request the information is 26 U.S.C. 6001.

The primary purpose of the form is to provide a method of reporting identity theft issues to the IRS so that the IRS may document situations where individuals are or may be victims of identity theft. Additional purposes include the use in the determination of proper tax liability and to relieve taxpayer burden. The information may be disclosed only as provided by 26 U.S.C. 6103. Providing the information on this form is voluntary. However, if you do not provide the information it may be more difficult to assist you in resolving your identity theft issue. If you are a potential victim of identity theft and do not provide the required substantiation information, we may not be able to place a marker on your account to assist with future protection. If you are a victim of identity theft and do not provide the required information, it may be difficult for IRS to determine your correct tax liability. If you intentionally provide false information, you may be subject to criminal penalties. You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W-CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send this form to this address. Instead, see the form for filing instructions. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

Notice of Levy

Date 01/14/2016	Telephone number of IRS office 00928
Reply to ACS SUPPORT - STOP 5050 PO BOX 219236 KANSAS CITY, MO 64121-9236	TOLL FREE 1-800-829-7650 WI
P 99-0034327	Name and address of taxpayer
To BANK ATTN: GARNISHMENT / TAX LEVY PO BOX 3200 HONOLULU HI 96847-0001005	Identifying number(s) HOU B 00

This isn't a bill for taxes you owe. This is a notice of levy we are using to collect money owed by the taxpayer named above.

Kind of Tax	Tax Period Ended	Unpaid Balance of Assessment	Statutory Additions	Total
1040A	12-31-2010	\$ 24,653.17	\$ 5,446.91	\$ 30,100.0
This levy won't attach funds in IRAs, Self-Employed Individuals' Retirement Plans, or any other Retirement Plans in your possession or control, unless it is signed in the block to the right.			Total Amount Due ▶	\$ 30,100.

We figured the interest and late payment penalty to **02/10/2016**

Although we have told you to pay the amount you owe, it is still not paid. This is your copy of a notice of levy we have sent to collect this unpaid amount. We will send other levies if we don't get enough with this one.

Banks, credit unions, savings and loans, and similar institutions described in section 408(n) of the Internal Revenue Code must hold your money for 21 calendar days before sending it to us. They must include the interest you earn during that time. Anyone else we send a levy to must turn over your money, property, credits, etc. that they have (or are already obligated for) when they would have paid you.

If you decide to pay the amount you owe now, please **bring** a guaranteed payment (cash, cashier's check, certified check, or money order) to the nearest IRS office with this form, so we can tell the person who received this levy not to send us your money. Make checks and money orders payable to **United States Treasury**. If you mail your payment instead of bringing it to us, we may not have time to stop the person who received this levy from sending us your money.

If we have erroneously levied your bank account, we may reimburse you for the fees your bank charged you for handling the levy. You must file a claim with the IRS on Form 8546 within one year after the fees are charged.

If you have any questions, or want to arrange payment before other levies are issued, please call or write us. If you write to us, please include your telephone number and the best time to call.

*Visit www.irs.gov to determine the closest IRS office that furnishes cash payment processing service.

Signature of Service Representative

Title

Operations Manager, ACS

Letter Number: 2797
Date of this Letter: 01/11/2016

Taxpayer Identification Number:

For assistance you may call us at:
1-800-829-0922

Office Hours:
8:00 AM - 4:30 PM

Person to Contact:
Customer Service Rep

BOD CODE: WI
CP: 501

068508.630581.215618.29419 1 AB 0.416 540
[Barcode]

GU 96928-0106

068508

Dear

We need your assistance in updating our records. Please fill in the address information requested below. In order to make changes to your address your signature is required. Return your response within 10 days from the date of this letter. An envelope is enclosed for your convenience. Thank you for your cooperation.

Is the above address correct? YES ☐ NO ☐

If you checked NO, please complete the following:

Your Signature - (Required to update our records)

C/O or Guardianship

Your street address or P.O. Box Number

City State Zip code

()
Daytime telephone number

()
Cell Phone Number

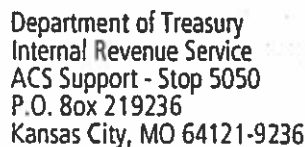
If you have any questions, you may contact a Customer Service Representative by calling the toll-free telephone number shown above. For faster service, try calling us any day except Monday when our call volumes are highest.

Sincerely yours,
Compliance Services Field Director

Ensure that the Internal Revenue Service return address shows in the window.



Internal Revenue Service
Cincinnati, OH 45999-0250
[Barcode]



Notice	LT16
Notice Date	December 28, 2015
Taxpayer ID numb	
Case reference number	
To contact us	1-800-829-7650
Page 1 of 3	

007316.471110.240282.21352 1 MB 0.439 701



Your account has been assigned for enforcement action

Please call us about your unpaid taxes and unfiled tax returns

We're trying to collect unpaid taxes from you for the year(s) shown on the Billings Summary below. We are also trying to get your tax return(s) for the year(s) shown in the Summary of Missing Tax Returns section.

We have assigned your account for enforcement action. Enforcement action may include seizing your wages or property.

It is important that we hear from you within 10 days.

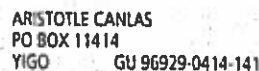
What you need to do

- Pay the amount you owe immediately. If you can't pay the amount due in full, call us at 1-800-829-7650 to discuss your options. Be ready to tell us what your monthly income and expenses are so we can help you arrange a payment plan.
- File any missing tax returns and submit payment for any tax due. If you are unable to file your missing return(s) immediately, please call us at 1-800-829-7650. If you are able to file but not able to pay the tax shown on the return(s), file the missing return(s) and then call us at 1-800-829-7650 to discuss payment options.

Next Steps

If you are unable to resolve your tax issue now, call us at 1-800-829-7650. If you don't respond, we will take steps to collect all amounts due, including applicable penalties and interest.

Continued on back



Notice	LT16
Notice date	December 28, 2015
Taxpayer ID number	
Case reference number	



Payment

INTERNAL REVENUE SERVICE
ACS SUPPORT - STOP 5050
P.O. BOX 219236
KANSAS CITY, MO 64121-9236



- Make your check or money order payable to the United States Treasury.
- Write your Taxpayer ID number (XXX-XX-3861) and the tax period(s) on your payment and any correspondence.

Amount due

\$48,676.11